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TO: Examiner Aung Soe Moe
US Patent & Trademark Office

FROM: Frank A. DeLucia

RE: U.S. Patent Appln. No. 09/977,319
Our Ref.: 00862.022407

FAX NO.: 571-273-8300

DATE: August 2, 2005

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

HARUYUKI KITAWAKI

Application No.: 09/977,319

Filed: October 16, 2001

For: SYSTEM FOR CHANGING
SETUP OF FIRST DEVICE
THAT EXECUTES
PREDETERMINED
FUNCTION BY SECOND
DEVICE AND THESE
DEVICES

Examiner: Aung Soe Moe

Art Unit: 2612

August 2, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450AMENDMENT

Sir:

Responsive to the Office Action of June 30, 2005, the Examiner is
respectfully requested to amend the above-identified application as follows.

I hereby certify that this correspondence is being facsimile transmitted to
Examiner Aung Soe Moe, AU 2612 at facsimile No. 571-273-8300 on
August 2, 2005

(Date of Deposit)

FRANK A. DELUCIA (Reg. No. 42,476)

(Name of Attorney for Applicant)

Signature

August 2, 2005

Date of Signature

In re Application of:

Docket No. 00862.022407.

HARUYUKI KITAWAKI

Application No.: 09/977,319

Examiner: Aung Soe Moe

Filed: October 16, 2001

Art Unit: 2612

For: SYSTEM FOR CHANGING SETUP OF FIRST DEVICE
 THAT EXECUTES PREDETERMINED FUNCTION
 BY SECOND DEVICE AND THESE DEVICES

Date: August 2, 2005

Mail Stop Amendment
 The Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 10	MINUS	** 34	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 3	MINUS	*** 10	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—						

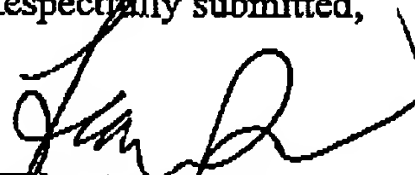
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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Frank A. DeLucia
Attorney for Applicant
Registration No. 42,476

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